REQUEST FOR WITHDRAWAL ASPARTTORNEY OR AGENT	Application Number	09/805,020
	Filing Date	March 13, 2001
	First Named Inventor	Zurit LEVINE et al.
	Group Art Unit	1642
	Examiner Name	Huff

Attorney Docket Number | 2786-0168P Commissioner for Patents To: P.O. Box 1450 Alexandria, VA 22313-1450 I hereby apply to withdraw as attorney or agent for the above-identified patent application. The reasons for this request are: Application is being transferred to another law firm. 1. \square The correspondence address is NOT affected by this withdrawal. 2. \times Change the correspondence address and direct all future correspondence to: CORRESPONDENCE ADDRESS Place Customer Number Customer Number 02292 Bar Code Label here Staas & Halsey LLP Individual Name 1201 New York Avenue, N.W. Address Suite 700 Address 20005 State ZIP Washington DC City Country 202-434-1501 202-434-1500 Fax Telephone ∑ This request is made on behalf of myself and \boxtimes all the attorneys/agents of record, the attorneys/agents (with registration numbers) listed on the attached paper(s), This request is enclosed in triplicate (including any attachments). Name Marc S, Weiner, #32,181 Signature May 2, 2005 Date

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.